



RCE
P 2665
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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. 1450
Alexandria, VA 22313-1450

Application No.	09/753,227
Filing Date	December 28, 2000
First Named Inventor	Darwin A. Engwer
Art Unit	2665
Examiner Name	Justin M. Philpott
Attorney Docket Number	3239P071

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. § 1.114		Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).	
<p>a. <input checked="" type="checkbox"/> Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.</p> <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on <u>May 3, 2004</u> (Any unentered amendment(s) referred to above will be entered). ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ iii. <input type="checkbox"/> Other _____ <p>b. <input type="checkbox"/> Enclosed</p> <ul style="list-style-type: none"> i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) <p>iii. <input type="checkbox"/> Information Disclosure Statement (IDS)</p> <p>iv. <input type="checkbox"/> Other _____</p>			
2. Miscellaneous			
<p>a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)</p> <p>b. <input type="checkbox"/> Other _____</p>			
3. Fees			
<p>The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.</p> <p>a. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>02-2666</u>.</p> <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> RCE fee required under 37 C.F.R. § 1.17(e) and any additional claims fee(s) ii. <input checked="" type="checkbox"/> Extension of time fee (37 C.F.R. § 1.136 and 1.17) iii. <input type="checkbox"/> Other: <u>(\$0.00)</u> <p style="text-align: right;"><u>06/07/2004 MAHMED1 00000102 09753227</u></p> <p>b. <input checked="" type="checkbox"/> Check in the amount of <u>\$898.00</u> enclosed <u>01 FC:1801</u> <u>770.00 OP</u></p> <p>c. <input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosd)</p>			
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>			

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JUN 08 2004

Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018
Signature			
	Date	June 1, 2004	

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

June 1, 2004

Name (Print/Type)	Susan McFarlane
Signature	
Date	June 1, 2004



TRANSMITTAL for FY 2004

Effective 01/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 880.00)

Complete if Known	
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METHOD OF PAYMENT (*check all that apply*)

FEE CALCULATION (continued)

Check Credit card Money Order Other None
 Deposit Account

**Deposit
Account
Number** 02-2666

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity			Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

2. EXTRA CLAIM FE

	Claims	below	Fee Paid
Total Claims	<input type="text"/>	- 29** = <input type="text"/>	X <input type="text"/> = <input type="text"/>
Independent Claims	<input type="text"/>	- 6 = <input type="text"/>	X <input type="text"/> = <input type="text"/>
Multiple Dependent			

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	<u>Fee Description</u>
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple Dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(S)** **880.00**

SUBMITTED BY

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone
Signature			Date	06/01/04

Based on PTO/SB/17 (10-03) as modified by Blakely, Solokoff, Taylor & Zafman (wtr) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450